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## BIB DATA SHEET

CONFIRMATION NO. 8862

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/593,367	12/10/2007	128	3772	34783	
<b>APPLICANTS</b> Elan Ziv, Ramat Gan, ISRAEL;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL05/00303 03/17/2005 which claims benefit of 60/553,966 03/18/2004 and claims benefit of 60/553,965 03/18/2004 and claims benefit of 60/555,979 03/25/2004 ok, kjn 6/16/2010 and claims benefit of 60/602,636 08/19/2004					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 03/14/2008					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KERI JESSICA Acknowledged NICHOLSON/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWINGS</b> 20	<b>TOTAL CLAIMS</b> 38	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> MARTIN D. MOYNIHAN d/b/a PRTSI, INC. P.O. BOX 16446 ARLINGTON, VA 22215 UNITED STATES					
<b>TITLE</b> Apparatus For the Treatment of Feminine Pelvic Organ Prolapse					
<b>FILING FEE RECEIVED</b> 1425	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		